87 Nepperhan Ave Room 212 Yonkers, NY 10701

## CITY OF YONKERS HOME IMPROVEMENT LICENSE APPLICATION SUPPLEMENTARY LICENSE

Phone: 914-377-6808 Fax: 914-377-6811 Website: www.YonkersNY.gov

#### INSTRUCTIONS FOR USING THIS FORM

#### **Please Note:**

A supplementary license is required for each additional place of business maintained by a licensee within the City of Yonkers. Each such supplementary license will hold the same license number as the Primary Location.

If the required supporting documents are not submitted with the application, it will result in the delay and/or denial of the application.

#### Requirements:

- 1. Application must be signed by the applicant before a Notary Public.
- 2. Two (2) passport-sized photographs taken within sixty (60) days of application date.
- 3. Copy of a valid Driver's License issued by the Motor Vehicle Department. If you do not have a Driver's License, a copy of a Motor Vehicle issued ID Card is required.
- 4. Application fee of \$10.00 Payment may be submitted in Cash, Money Order or Business Check. Please make checks payable to The City of Yonkers.
- 5. No license shall be assignable or transferable. Each additional location must have a completed application And hold a valid license from this office.
- 6. Each license must be posted in a conspicuous place on/in the vehicle.
- 7. Notify this office IMMEDIATELY of any changes in the information supplied by you on this application.

#### **EXPIRATION DATE**

License expires two years following date of Primary Location's issuance

Mike Spano, Mayor Kerry O'Brien Hess, Director

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#### Home Improvement

Pursuant to the provisions of the Code of the City of Yonkers, I the undersigned respectfully petition for the below-listed license in the City of Yonkers, and for that purpose, I hereby provide the following answers to the questions contained herein.

swers to the questions co		ors, and for that	. purpose, rrie	leby provid	de the following an-
Name:	Social Security #:				
Address (P.O. Boxes Not A	Accepted):				
City:		State:		Zip:	
Home Phone #:		Cell #:		E-mail:	
Date of Birth:	Sex:	Height:	Hair Color	:	Eye Color:
Are you a citizen of the	United States?				
If not, please provide a	copy of your INS	A Card and	#		
Have you ever been an	rested or convict	ed of a crime'	?		
If yes, explain:					
Name of Company:					
DBA/Trade or Display N	Name (If same n	ame, enter N/	A):		
Address:					
City:		State:		Zip:	
Telephone:		E-mail:			
Type of Ownership:	individual owr	nerpar	tnership	corpora	ation
Number of vehicles use	es used in business		Attach copy of each registration.		
Type of Home Improve	ment you perforr	n:			
Purpose of Additional L	ocation:				
Primary License #: _	<del> </del>	Date Issued:			· · · · · · · · · · · · · · · · · · ·

I,						
Signature/Date: Print name:						
Notary Public						
Hold Harmless Clause						
The contractor agrees to protect, defend, indemnify, and hold the City of Yonkers and its employees free and harmless from and against any and all losses, claims, liens, demands, and causes of action of every kind and character including, but not limited to the amount of judgments, penalties, interest, court cost, legal fees incurred by the City of Yonkers et al, death or damages to property (including property of the City of Yonkers et al) and without I imitations by enumeration, all other claims or demands of every character occurring or in anyway incident to, in connection with, or arising directly or indirectly out of the said agreement. The contractor agrees to investigate, handle, respond to, provide defense for, and defend any such claims, demands, or suit at its sole expense and agrees to bear all other costs and expenses related thereto, even if it (claims, etc) is groundless, false, or fraudulent.						
Signature of Applicant (highest ranking) Date Witnessed by Date Company Official						